

**Application Data Sheet**

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	DIAPHRAGM PUMP
Attorney Docket Number::	06727/0203940-US0
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	5
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Aryeh
Family Name::	Ben-Yosef
City of Residence::	Mevasseret Zion
Country of Residence::	Israel
Street of mailing address::	9 Mevo HaDovdevan Street
City of mailing address::	Mevasseret Zion
Country of mailing address::	Israel
Postal or Zip Code of mailing address::	90805

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Ephraim  
Family Name:: Carlebach  
City of Residence:: Ra'anana  
Country of Residence:: Israel  
Street of mailing address:: 226 Weizman Street  
City of mailing address:: Ra'anana  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 43663

**Correspondence Information**

Correspondence Customer Number:: 07278

**Representative Information**

Representative Customer Number:: 07278

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IL2004/000693	07/28/04

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Israel	157160	07/29/03	Yes

**Assignee Information**

Assignee name:: ORIDION MEDICAL 1987 LTD.  
Street of mailing address:: 7 Hamarpe Street  
City of mailing address:: Jerusalem  
Country of mailing address:: Israel  
Postal or Zip Code of mailing address:: 91450